

CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	+					
2		+				
3		+				
4		L				
5		L				
6	+					
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33	X					
34	+					
35	L					
36	+					
37	+					
38	+					
39	+					
40	+					
41		+				
42		+				
43	L					
44	+					
45	+					
46	+					
47	+					
48	+					
49	+					
50	+					
TOTAL IND.	30	↓		↓		↓
TOTAL DEP.	20					
TOTAL CLAIMS	50					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS